

Panaji, 27th July, 2006 (Sravana 5, 1928)

SERIES I No. 17

OFFICIAL GAZETTE



GOVERNMENT OF GOA

EXTRAORDINARY

GOVERNMENT OF GOA

Department of Social Welfare

Directorate of Social Welfare

Notification

82-2-05-06/SDB

The Government of Goa is pleased to provide insurance cover all the persons below or marginally above the poverty line engaged in un-organized sectors by providing insurance under the scheme of Sahara.

1. *Objective.*— The objective of “Sahara” is to provide Insurance/Security cover to the un-organized sectors in case of death of earning member of the family and also to provide financial assistance to their children to complete the study up to 12th Standard.

2. *Target Groups.*— Persons between age 18 to 60 years involved in the following professions.—

1. Motorcycle pilot
2. Car/truck/Bus/rickshaw/tempo/Taxi drivers
3. Cleaners
4. Toddy tappers
5. Carpenters
6. Masons
7. Small business traders having their gadda in village or town
8. Labourers
9. Fish vendors

10. Vegetable sellers
11. Pot makers
12. Traditional artisans
13. Agricultural labourers
14. Coconut pluckers

And whose names are enrolled in the electoral roll of Goa Legislative Assembly.

3. *Insurance Cover.*— The Life Insurance Corporation of India will provide Insurance cover to all the above category beneficiaries under their “Janashree Bima Yojana” and will provide following assistance:—

(a) In the event of natural death of the member, sum assured of Rs. 20,000/- will become payable to the nominee.

(b) *Accident Benefit:* In the event of death by accident or partial/total permanent disability due to accident the following benefits shall be payable:

(i) On death due to accident	Rs. 50,000/-
(ii) Permanent total disability due to accident	Rs. 50,000/-
(iii) Loss of both ears or both limbs or one eye and one limb in an accident	Rs. 50,000/-
(iv) Loss of one eye or one limb in an accident	Rs. 25,000/-

(c) All the children of the member of this scheme who are studying in the Standard 9th to 12th any stream (including ITI) will be paid Rs. 300/- per quarter (3 months). However, if the child fails and is detained in the same class the financial assistance mentioned above will not be provided for the next year.

4. *Registration of beneficiaries.*— All the eligible persons may apply to the Block Development Officer in the prescribed application form (*annexure-I and II*) with the following documents:

1. Proof of Age.
2. List of the Children studying in class IX to XII.
3. Rs. 50/- (Registration fees).

(In case applicant children are studying in standard IX to XII he/she shall also filed up application (*Annexure-2*) for scholarship under Shiksha Sahayog Yojana).

5. *Scrutiny of applications.*— The applications so received will be scrutinised by the BDO at taluka level. If the application is found in order it will be forwarded to the LIC under the intimation to the Director of Social Welfare for its enrolment under the scheme (*Annexure-VI*). The registration fees received by the B.D.O. will be deposited in the Government Treasury under the head as notified by the Director of Social Welfare time to time. A copy of the challan shall be attached with the intimation submitted to the Director of Social Welfare. The list of students eligible for Scholarship under the scheme will be submitted to the L.I.C. in (*Annexure-III*).

6. *Payment of premium to the LIC.*— The Director of Social Welfare on receiving the intimation from the Block Development Officer, deposit the premium to the L.I.C. within a week. The beneficiaries will be covered under the scheme from the day premium deposited to the LIC.

7. *Interval forwarding the applications to the LIC.*— Applications will be submitted every month

on 1st working day of the month initially one year. Once the maximum beneficiaries enrolled from the next financial year name will be forwarded once in 3 months.

8. *Renewal of the insurance.*— The renewal of the insurance will be done on the proposal received from the BDO by the Director of Social Welfare.

9. *Payment of stipend to the children of the beneficiaries.*— The LIC will pay directly the entitled stipend amount to the children of the beneficiaries through the respective education institutions under the intimation to the BDO. The educational institution shall submit the Utilization Certificate in (*Annexure IV*).

10. *Claims under the scheme.*— All the claim applications will be submitted to the LIC through the BDO in *Annexure-V*.

11. *Monitoring.*— The Block Development Officer shall submit the periodical reports/returns to the Director of Social Welfare in the prescribed proforma (*Annexure-VII*). The monitoring of the programme at the State level will be the responsibility of the Directorate of Social Welfare.

12. *Evaluation Studies.*— The Government shall conduct periodic evaluation studies on the implementation of the "Sahara". By reputed institutions and organizations on issues thrown up by the concurrent evaluation, meriting detailed studies. Copies of the reports of these evaluation studies conducted should be furnished to the Legislative Assembly. Remedial action shall be taken on the basis of the observations made in these evaluation studies and also in the concurrent evaluation conducted.

By order and in the name of Governor
of Goa.

N. D. Agrawal, Director of Social Welfare & ex officio Joint Secretary (Social Welfare).

Panaji, 26th July, 2006.

(Annexure-I)

Government of Goa
Department of Social Welfare
Application for enrolment under Sahara
(See Para 4)

Application to join Group Insurance scheme **Sahara** and Nomination Form (to be obtained by the Nodal Agency from each member and retained with them after registration in *Annexure VI*).

To,
The Block Development Officer,
.....

Dear Sir,

I, acknowledge having read and understood the Rules which described the terms and conditions of the above scheme arranged with the Life Insurance Corporation of India to provide benefits in the event of my death whilst still being an eligible member.

I now apply for admission as a member of the Scheme on the terms laid down in the Rules.

The particulars in my respect are as under:

- (a) Full Name:
(b) Father's/Husband's name:
(c) Occupation:
(d) Residential Address:
(e) Date of birth:
(f) Age:
(g) Marks of identification:
(h) State of health:
(i) Caste: SC/ST/OBC/General
(j) Electoral Roll details: Serial number Part Number Assembly Constituency

I hereby nominate the following person/s to whom the sum assured under the scheme shall be paid in the event of my death while being covered by the above scheme. The nominees shall share the policy monies equally.

(Strike out if not applicable)

S. No.	Name	Age	Relationship	Address
--------	------	-----	--------------	---------

Date:

Signature of member

Nomination registered on vide Registration No. of register of members and Registration fees is deposited vide receipt No. dated

Signature of Authorised Officer
of the Nodal Agency who received the application form

(In case applicant children are studying in Standard IX to XII he/she shall also filled up application for scholarship under Shiksha Sahayog Yojana)

(Annexure-II)

LIFE INSURANCE CORPORATION OF INDIA
P & GS UNIT, GOA

POLICY No. GI/JBY

Application for Scholarship under Shiksha Sahayog Yojana

(See Para 4)

1. To be filled in by the Member

Name of the Member under Janashree Bima

(a) Yojana (Sahara):

(b) Registration No.:

(c) Occupation:

(d) Address:

(e) Name of the student:

(f) Whether son or daughter:

(g) Name and place of the School/Institution:

(h) Date of Birth of student:

(i) Std./ Academic
Class Year

(j) I hereby declare that I am fully made to understand that the Scholarship benefit under Shiksha Sahayog Yojana is restricted to maximum of two children of a family and is payable to students studying in IXth to XIIth (including ITI courses).

I hereby declare that my child has not failed in last academic year.

Signature of the Member

(Annexure-III)

LIFE INSURANCE CORPORATION OF INDIA
P & GS UNIT, GOA

MASTER POLICY No.

List of students eligible for Scholarship under (Sahara) Shiksha Sahayog Yojana

(To be submitted by Nodal Agency to P & GS unit)

(See Para 5)

Sr. No.	Name of the student	Institution's/school's name	Class in which studying	Member's name	Membership number	For Year & Quarter ending	Amount to be paid
---------	---------------------	-----------------------------	-------------------------	---------------	-------------------	---------------------------	-------------------

Date:

Seal

Signature of Authorised Official Nodal Agency

2. To be filled in by the School/Institution

Certified that the above particulars of the child are true and correct as per the School/Institution's records

.....
(Countersigned by the Authorised signatory of the
School/Institution under seal

3. To be filled by the Nodal Agency (Block Development Officer)

1. Name of the Nodal Agency:

2. Address:

3. Date of commencement of the S.S.Y./Date of renewal of the S.S.Y.

We hereby undertake to pass on the benefit of scholarship available under the Shiksha Sahayog Yojana to the above named beneficiary and submit Certificate of Utilisation as per *Annexure IV* hereto.

SEAL

.....
Block Development Officer

PART B

(To be completed by the Nodal Agency i.e. B.D.O.)

Certified that the replies to the above questions are correct in every respect. Nominee named above also certified that the deceased was a resident of the State of Goa, aged between 18 years to 59 years of age and a member of the above scheme. Also certified that the nominee's particulars have also been verified.

SEAL

Block Development Officer

PART C

DISCHARGE RECEIPT

We hereby acknowledge receipt from Life Insurance Corporation of India a sum of Rs. (Rupees.) in full and final satisfaction and discharge of all our claims under the above master policy on the life of member

Revenue Stamp

Place:

Date:

SEAL

Block Development Officer

Government of Goa
Department of Social Welfare
GROUP INSURANCE SCHEME UNDER (SAHARA JANASHREE BIMA YOJANA)

(See Para 5)

Sr. No.	Full Name and Occupation	Sex	Date of admission into the scheme	Date of Birth & Age at entry	Name of Father/ /Husband	Address of the Member	Name of the Nominee, Age and relationship with member	Caste
1	2	3	4	5	6	7	8	9

MONTHLY REPORT UNDER SAHARA

(See Para 11)

Month

1. No. of applications received under the Scheme during the month:

2. No. of applications granted during the month:

3. Registration feeds received..... Rs. deposited vide Challan as per details below:—

[illegible]

4. Total cases registered in the Block (Progressive):

5. No. of Proposal submitted to the L.I.C.:

6. Details of Policies:—

Sr. No.	Policy No.	Date	No. of persons covered	Validity period		Due date of renewal	Date when actually renewed
				From	To		
1	2	3	4	5	6	7	8

7. No. of children of beneficiaries taken Stipend:

8. Whether delay in distributing Stipend to the students:

9. Detail of claim applications forwarded to the L.I.C.

Sr. No.	Name	Date of Death/Disability	Amount claimed	Case forwarded to L.I.C.	Date of sanction
---------	------	--------------------------	----------------	--------------------------	------------------

10. Any other points which B.D.O. wants to mention.:

Block Development Officer